**Application or Docket Number**
10714195
39 7550 0005A

## CLAIMS AS FILED - PART I

| | (Column 1) | (Column 2) | SMALL ENTITY TYPE ☐ | OR | OTHER THAN SMALL ENTITY | |
|---|---|---|---|---|---|---|
| | | | RATE | FEE | RATE | FEE |
| **TOTAL CLAIMS** | 55 | | BASIC FEE | 385.00 | BASIC FEE | 770.00 |
| **FOR** | NUMBER FILED | NUMBER EXTRA | | | | |
| **TOTAL CHARGEABLE CLAIMS** | 59 minus 20 = | * 39 | X$ 9 = | 351.00 | X$18 = | |
| **INDEPENDENT CLAIMS** | 12 minus 3 = | * 9 | X43 = | 387.00 | X86 = | |
| **MULTIPLE DEPENDENT CLAIM PRESENT** | | ☐ | +145 = | 145.00 | +290 = | |
| | | | TOTAL | 1268.00 | TOTAL | |

* If the difference in column 1 is less than zero, enter "0" in column 2

## CLAIMS AS AMENDED - PART II

1-90S

### AMENDMENT A

| | (Column 1) CLAIMS REMAINING AFTER AMENDMENT | | (Column 2) HIGHEST NUMBER PREVIOUSLY PAID FOR | (Column 3) PRESENT EXTRA | SMALL ENTITY RATE | ADDITIONAL FEE | OR | OTHER THAN SMALL ENTITY RATE | ADDITIONAL FEE |
|---|---|---|---|---|---|---|---|---|---|
| Total | * 21 | Minus | ** 59 | = 1 | X$ 9 = | | OR | X$18 = | |
| Independent | * 5 | Minus | *** 12 | = | X43 = | | OR | X86 = | |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM ☐ | | | | | +145 = | | OR | +290 = | |
| | | | | | TOTAL ADDIT. FEE | | OR | TOTAL ADDIT. FEE | |

### AMENDMENT B

| | (Column 1) CLAIMS REMAINING AFTER AMENDMENT | | (Column 2) HIGHEST NUMBER PREVIOUSLY PAID FOR | (Column 3) PRESENT EXTRA | SMALL ENTITY RATE | ADDITIONAL FEE | OR | OTHER THAN SMALL ENTITY RATE | ADDITIONAL FEE |
|---|---|---|---|---|---|---|---|---|---|
| Total | * 20 | Minus | ** 59 | = | X$ 9 = | | OR | X$18 = | |
| Independent | * 4 | Minus | *** 12 | = | X43 = | | OR | X86 = | |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM ☐ | | | | | +145 = | | OR | +290 = | |
| | | | | | TOTAL ADDIT. FEE | | OR | TOTAL ADDIT. FEE | |

### AMENDMENT C

| | (Column 1) CLAIMS REMAINING AFTER AMENDMENT | | (Column 2) HIGHEST NUMBER PREVIOUSLY PAID FOR | (Column 3) PRESENT EXTRA | SMALL ENTITY RATE | ADDITIONAL FEE | OR | OTHER THAN SMALL ENTITY RATE | ADDITIONAL FEE |
|---|---|---|---|---|---|---|---|---|---|
| Total | * | Minus | ** | = | X$ 9 = | | OR | X$18 = | |
| Independent | * | Minus | *** | = | X43 = | | OR | X86 = | |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM ☐ | | | | | +145 = | | OR | +290 = | |
| | | | | | TOTAL ADDIT. FEE | | OR | TOTAL ADDIT. FEE | |

* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."
*** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."
. The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.